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Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 7590 03/07/2006 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. SUGHRUE MION ZINN MACPEAK & SEAS, PLLC 2100 Pennsylvania Avenue, NW Washington, DC 20037-3213 (Depositor's name) (Signature) (Date) APPLICATION NO. **FILING DATE FIRST NAMED INVENTOR** ATTORNEY DOCKET NO. CONFIRMATION NO. 09/956,925 09/21/2001 Hideaki Yagi Q66253 2471 TITLE OF INVENTION: OXYGEN ENRICHING APPARATUS, CONTROLLER, AND RECORDING MEDIUM APPLN. TYPE **SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE** NO nonprovisional \$1400 \$300 \$1700 06/07/2006 **EXAMINER ART UNIT** CLASS-SUBCLASS LEWIS, AARON J 3743 128-204230 1. Change of correspondence address or indication of "Fee Address" (37) 2. For printing on the patent front page, list CFR 1.363). (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a ☐ "Fee Address" indication (or "Fee Address" Indication form SUGHRUE MION, PLLC registered attorney or agent) and the names of up to PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 2 registered patent attorneys or agents. If no name is Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) NGK SPARK PLUG CO., LTD. Aichi, Japan 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fee A check is attached for the NOA Fees payment. Please Publication Fee (No small entity discount permitted) charge any payment deficiency and credit overpayment to ☐ Advance Order - # of Copies any overpayment, to PODA 19-4880. A duplicate copy of this form is attached. copy of this form). 5. Change in Entity Status (from status indicated above) ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. 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